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UTILITY PATENT APPLICATION **TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

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Attorn	ey Docket No.	02755/100J524-US1					
First Ir	nventor	Bruce E. Reidenberg					
Title		MAL BUPRENORPHINE TO TREAT KLE CELL CRISIS					

						Exp	ress Ma	ail La	bel No. ·					_	0
See MF		APPLICATION ELEMENTS ter 600 concerning utility patent application contents.						MS Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450						0	U.S. P. 36049
1. X 2. 3. X	(Submit a Applican See 37 (Specifican (preferred	arrangement set forth below) b Specification Sequence Listing on							ence Submissi	ion	22386 10/7				
	- Cross - State - Refer or a c - Backs - Brief - Brief - Detai	scriptive title of the invention ss Reference to Related Applications tement Regarding Fed sponsored R & D ference to sequence listing, a table, a computer program listing appendix kground of the Invention of Summary of the Invention of Summary of the Drawings (if filed) ailed Description						i. CD-ROM or CD-R (2 copies); or ii. Paper c. Statements verifying identity of above copies ACCOMPANYING APPLICATION PARTS 9. X Assignment Papers (cover sheet & document(s))						Paper	
4	Drawing	(s) (35 U		13) [T	Total Sheets		10.	(when there is an assignee) Attorney 11. English Translation Document (if applicable)							
5. Oath or Declaration [Total Sheets 8] a. X Newly executed (original or copy) b. Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed) i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 6. X Application Data Sheet. See 37 CFR 1.76 18. If a CONTINUING APPLICATION, check appropriate box, and suppl specification following the title, or in an Application Data Sheet under 37 Continuation Divisional Continuation-in-part (C Prior application information: Examiner For CONTINUATION OR DIVISIONAL APPS only: The entire disclosur under Box 5b, is considered a part of the disclosure of the accompanying						37 CFR t (CIP) sure of	of p	Statement (Preliminary Return Reco (Should be Certified Co (if foreign prio Nonpublicat Applicant m Other: orior applicatio Arrior applicatio tion or divisio	IDS)/I Amer eipt P specification R tion R ust at	PTO-1449 adment ostcard (I fically item Priority D Jaimed) dequest ur tach form	MPE nizec	ment(s) 35 U.S.C. 122 D/SB/35 or its e	(b)(2)(B)(equivalent	i.	
			• <u>su</u>	<u> </u>					ADDRESS		Om the St		accu application	ii parts.	
×	Custome	ustomer Number: 07278				OR Correspondence address below									
Name	DARBY & DARBY P.C. Joseph R. Robinson														
Address	Address P.O. Box 5257														
City		New York State						10150-52							
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Nam	e (Print/	Гуре)	Jose	eph 🕅 F	Robinson			Reg	istration No. (Attorn	ey/Agent)	33,448		
Sign	àture			lle	821	hlla		4	4085		Date	D	ecember 1	5, 200	3

MARIE GILFILLAN

PT	O/SB/	/17 ((10-02)

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CEC TO ANOMITTAL		Complete if Known				
FEE TRANSMITTAL	l	Application Number			er Not Yet Assigned	
for FY 2003	L	Filing Date			Concurrently	
Patent fees are subject to annual revision.	First Named Inventor			Inven	ntor Bruce E. Reidenberg	
	Examiner Name			me	Not Yet Assigned	
Applicant claims small entity status. See 37 CFR 1.27		Group Art Unit N/A				
TOTAL AMOUNT OF PAYMENT (\$) 1,126.00		Attom	ey Doo	ket No	o. 02755/100J524-US1	
METHOD OF PAYMENT (check all that apply)				FEE	E CALCULATION (continued)	
X Check Credit Money Other None Deposit Account	3. A	DDITIO	ONAL	FEES	3	
Deposit .	Large	Entity	Small	Entity	_	
Account Number	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description Fee Paid	
Deposit	1051	130	2051	65	Surcharge – late filing fee or oath	
Account Name			0		Surcharge – late provisional filing fee or cover	
The Commissioner is hereby authorized to: (check all that apply)	1052	50	2052	25	sheet.	
Charge fee(s) indicated below X Credit any overpayments	1053	130	1053	130	Non-English specification	
Charge any additional fee(s) during the pendency of this application	1812	2,520	1812	2,520	For filing a request for ex parte reexamination	
Charge fee(s) indicated below, except for the filing fee	1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
to the above-identified deposit account.	1805	1,840*	1805	1,840*	Requesting publication of SIR after	
FEE CALCULATION	1251	110	2251	55	Examiner action Extension for reply within first month	
1. BASIC FILING FEE	1252	400	2252	200	Extension for reply within second month	
Large Entity Small Entity	1253	920	2253	460	Extension for reply within third month	
Fee Fee Fee Fee Fee Description Fee Paid	1254	1,440	2254	720	Extension for reply within fourth month	
1001 740 2001 370 Utility filing fee 770.00	1255	1,960	2255	980	Extension for reply within fifth month	
1002 330 2002 165 Design filing fee	1401	320	2401	160	Notice of Appeal	
1003 510 2003 255 Plant filing fee	1402	320	2402	160	Filing a brief in support of an appeal	
1004 740 2004 370 Reissue filing fee	1403	280	2403	140	Request for oral hearing	
1005 160 2005 80 Provisional filing fee	1451	1,510	1451		Petition to Institute a public use proceeding	
SUBTOTAL (1) (\$) 770.00	1452	110	2452	55	Petition to revive – unavoidable	
	1453	1,280	2453	640	Petition to revive - unintentional	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE Extra Fee from	1501	1,280	2501	640	Utility issue fee (or reissue)	
Claims below Fee Paid	1502	460	2502	230	Design issue fee	
Total Claims 28 -20** = 8 x 18.00 = 144.00 Independent 5 2** = 2** = 2	1503	620	2503	310	Plant issue fee	
Claims 5 -3 = 2 x 86.00 = 172.00	1460	130	1460	130	Petitions to the Commissioner	
Multiple Dependent	1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
Large Entity Small Entity	1806	180	1806	180	Submission of Information Disclosure Stmt	
Code (\$) Code (\$) Fee Description	8021	40	8021	40	property (times number of properties) 40.00	
1202 18 2202 9 Claims in excess of 20 1201 84 2201 42 Independent claims in excess of 3	1809	740	2809	370	Filing a submission after final rejection (37 CFR 1.129(a))	
1201 84 2201 42 Independent claims in excess of 3 1203 280 2203 140 Multiple dependent claim, if not paid	1810	740	2810	370	For each additional invention to be examined (37CFR 1.129(b))	
1204 84 2204 42 ** Reissue independent claims	1801	740	2801	370		
over original patent 1205 18 2205 9 ** Reissue claims in excess of 20	1802	900	1802	900	Request for expedited examination of a design application	
and over original patent	Other	fee (spe	cify)		<u> </u>	
SUBTOTAL (2) (\$) 316.00	*Redu	ced by E	Basic Fi	ling Fee	e Paid SUBTOTAL (3) (\$) 40.00	
** or number proviously paid if amater: For Poissues, see above						

SUBMITTED BY				Complete (if applicable)
Name (Print/Type)	Joseph R. Robinson	Registration No. (Attorney/Agent)	33,448	Telephone	(212) 527-7783
Signature	llegill	la 9	14085	Date	December 15, 2003
	MARIE 61	CFICLAN			



Attorney Docket No.: 02755/100J524-US1

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on	December 15, 2003
	Date

Typed or printed name of person signing Certificate

Note:

Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Specification (19pp.); Claims (4pp.); Abstract (1pg.) Utility Patent Application Transmittal Letter (1pg.)

Fee Transmittal Form (1pg.) Application Data Sheet (2pp.) Executed Declaration (8pp.) Executed Assignment (4pp.)

Assignment Recordation Cover Sheets (1pg.)

Check in the amount of \$1,126.00

CHECK # 3578